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20350 7590 02/11/2004

TOWNSEND AND TOWNSEND AND CREW, LLP
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| | |
|--------------------|--------------------|
| Gigi Hoover | (Depositor's name) |
| <i>Gigi Hoover</i> | (Signature) |
| April 21, 2004 | (Date) |

| APPLICATION NO. | FILING DATE | FIRST NAMED INVENTOR | ATTORNEY DOCKET NO. | CONFIRMATION NO. |
|-----------------|-------------|------------------------|---------------------|------------------|
| 10/028,999 | 12/20/2001 | Stephen J. Blumenkranz | 017516-008310US | 3769 |

TITLE OF INVENTION: CEILING AND FLOOR MOUNTED SURGICAL ROBOT SET-UP ARMS

| APPLN. TYPE | SMALL ENTITY | ISSUE FEE | PUBLICATION FEE | TOTAL FEE(S) DUE | DATE DUE |
|----------------|-------------------|--------------------------|-----------------|--------------------------|------------|
| nonprovisional | YES NO | \$665 \$1,330 | \$0 | \$665 \$1,330 | 05/11/2004 |

| EXAMINER | ART UNIT | CLASS-SUBCLASS |
|---------------------|----------|----------------|
| SAN MARTIN, EDGARDO | 2837 | 318-568110 |

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2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.

1. Townsend and Townsend
and Crew LLP
2. _____
3. _____

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PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. Inclusion of assignee data is only appropriate when an assignment has been previously submitted to the USPTO or is being submitted under separate cover. Completion of this form is NOT a substitute for filing an assignment.

(A) NAME OF ASSIGNEE

(B) RESIDENCE: (CITY and STATE OR COUNTRY)

Intuitive Surgical, Inc.

Sunnyvale, CA

Please check the appropriate assignee category or categories (will not be printed on the patent); ☐ individual ☒ corporation or other private group entity ☐ government

4a. The following fee(s) are enclosed:

☒ Issue Fee☐ Publication Fee☒ Advance Order - # of Copies 12

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(Authorized Signature)

(Date)

Nena Bains Reg. No. 47,400

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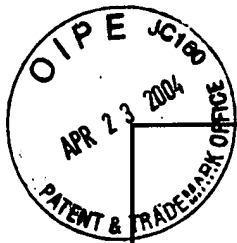
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04/26/2004 FHETEK12 00000167 201430 10028999

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**TRANSMITTAL
FORM***(to be used for all correspondence after initial filing)*

| | | |
|--|------------------------|-------------------------|
| TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i> | Application Number | 10/028,999 |
| | Filing Date | December 20, 2001 |
| | First Named Inventor | BLUMENKRANZ, STEPHEN J. |
| | Art Unit | 2837 |
| | Examiner Name | San Martin, Edgardo |
| Total Number of Pages in This Submission | Attorney Docket Number | 017516-008310US |

ENCLOSURES (Check all that apply)

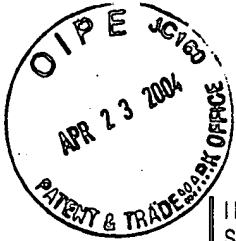
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| Remarks | | The Commissioner is authorized to charge any additional fees to Deposit Account 20-1430. |

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

| | | |
|--------------------|--|-----------------|
| Firm or Individual | Townsend and Townsend and Crew LLP Nena Bains | Reg. No. 47,400 |
| Signature | | |
| Date | 4-21-04 | |

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| Typed or printed name | Gigi Hoover | | |
| Signature | | Date | April 21, 2004 |



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Attorney Docket No.: 017516-008310US

Assistant Commissioner for Patents,
Washington, D.C. 20231, on April 21, 2004

TOWNSEND and TOWNSEND and CREW LLP

By

Gigi Hoover

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of:

BLUMENKRANZ, Stephen J.

Examiner: San Martin, Edgardo

Serial No.: 10/028,999

Art Unit: 2837

Filed: December 20, 2001

NOTIFICATION OF
LOSS OF ENTITLEMENT TO
SMALL ENTITY STATUS

For: CEILING AND FLOOR MOUNTED
SURGICAL ROBOT SET-UP ARMS

Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

Sir:

Pursuant to 37 C.F.R. 1.27(g)(2), notification is hereby given that small entity status is no longer appropriate in connection with the above-identified application.

Respectfully submitted,

Nena Bains
Reg. No. 47,400

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